

07/26/01
JC9893 U.S. PTO

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PTO/SB/50 (02-01)

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07/26/01

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

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Attorney Docket No.	NAK1-AZ69r
First Named Inventor	Yamanaka et al.
Original Patent Number	5,930,808
Original Patent Issue Date (Month/Day/Year)	07/27/99
Express Mail Label No.	EL852656598US

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. Fee Transmittal Form (PTO/ SB/ 56)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status. See 37 CFR 1.27.
3. Specification and Claims in double column copy of patent format (amended, if appropriate)
4. Drawing(s) (proposed amendments, if appropriate)
5. Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. Power of Attorney
7. Original U.S. Patent currently assigned? Yes No
(If Yes, check applicable box(es))
 - Written Consent of all Assignees (PTO/SB/53)
 - 37 C.F.R. § 3.73(b) Statement
(PTO/SB/96)
 - CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i CD-ROM (2 copies) or CD-R (2 copies); or
 - ii paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
11. Original U.S. Patent for surrender
 - Ribboned Original Patent Grant
 - Statement of Loss (PTO/SB/55)
12. Foreign Priority Claim (35 U.S.C. 119) (if applicable)
13. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
14. English Translation of Reissue Oath/Declaration (if applicable)
15. Preliminary Amendment
16. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: COPY OF US PATENT.....
5,930,808
.....

18. CORRESPONDENCE ADDRESS

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NAME (Print/Type)	Bradley D. Blanche	Registration No. (Attorney/Agent)	38,387
Signature		Date	7/26/01

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REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number (Optional) NAK1-AZ69r			
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 27 (C) 3	Total Claims (37 CFR 1.16(j)) Independent claims (37 CFR 1.16(j))	(B) 34 (D) 7	**** 7 = * 4 =	x \$ ____ =		or x \$ 18 = x \$ 80 =	126.00 320.00	
Basic Fee (37 CFR 1.16(h)) \$ _____					\$ 710.00			
Total Filing Fee \$ _____					OR \$ 1156.00			
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ ____ =		x \$ ____ =	
Independent Claims (37 CFR 1.16(j))	***	MINUS	*****	=	x \$ ____ =		x \$ ____ =	
Total Additional Fee \$ _____					OR \$ _____			
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p>								
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>16-2462</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>1,156.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>								
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July 26, 2001				 Signature of Applicant, Attorney or Agent of Record				
Date				<u>Bradley D. Blanche</u> Typed or printed name Reg. No. 38,387				